

**[ PHILHEALTH CIRCULAR NO. 014, S. 2014, June 13, 2014 ]**

**REVISED GUIDELINES FOR THE PHILHEALTH OUTPATIENT ANTI-TUBERCULOSIS DIRECTLY OBSERVED TREATMENT SHORT-COURSE (DOTS) BENEFIT PACKAGE**

*Adopted: 13 June 2014*

*Date Filed: 07 July 2014*

**I. BACKGROUND**

PhilHealth constantly develops its benefit packages to effectively respond to the needs of its members. Mindful of PhilHealth members afflicted with Tuberculosis (TB), the PhilHealth Board approved Resolution Nos. 485 and 490 of 2002 which established the case rate benefit for out-patient TB-DOTS package amounting to 4,000 pesos for "consultation, anti-tuberculosis medicines and necessary diagnostic services".

Subsequently, PhilHealth issued Circular No. 17 s-2003 which provided the guidelines for the accreditation of Directly Observed Therapy Short Course (DOTS) facilities as well as Circular No. 19, s-2003 that implemented the TBDOTS Package to include new cases, pediatric and extra-pulmonary TB. Although treated under DOTS and on out-patient basis, retreatment cases are not yet covered in the said Package.

The Philippine Plan Against Tuberculosis 2010-2016 was crafted to fine tune strategic directions with a view to sustain the gains of the TB control program and achieve Millennium Development Goals (MDG) for TB. The goal is to reduce TB prevalence and mortality rates by half compared to 1990 figures. Targets were marked at 85% case detection rate and at least 90% treatment success rate.

To achieve these targets, the NTP addressed some problems that hamper access to diagnosis and treatment of TB in the DOTS facilities. Criteria for management of sputum negative TB were modified in cases when there are no TB Diagnostic Committee (TBDC) (DOH Memorandum No. 2011-0218, dated July 19, 2011). The TBDC recommendation should not be a cause of delay in initiating treatment. In the said memorandum, DOH emphasized that ALL forms of TB should be given treatment. Also, to improve case finding, diagnosis by Direct Sputum Smear Microscopy (DSSM) shall only require submission of 2 samples, as stated in DOH Memorandum No. 2013-0021, dated January 9, 2013. The NTP Manual of Procedures was likewise revised to ensure that the processes in DOTS implementation support the objectives and strategies in the Philippine Plan of Action to Control Tuberculosis (PhilPACT). In light of the said modifications, the guidelines to PhilHealth TB-DOTS benefit package should be likewise updated to reflect the overall national objectives and standards of TB control.

Furthermore, the National Health Insurance Act of 2013 strengthens the role of PhilHealth in providing means for the members to have financial access to health care and for the healthcare providers to improve their health services. The law prohibits charging additional fees to indigent patients. It also prescribes that PhilHealth reimbursements to public health facilities be retained by the individual facility and be spent on operating expenses of the facility as well as improvement of its services, while professional fees shall be pooled and distributed among the facility's health personnel. Such measures are reflected in this revised TB DOTS package, such that public and private facilities have means to sustain the delivery of TB DOTS services, leading to better TB control.

## **II. OBJECTIVES**

This circular is issued with the following objectives:

1. To expand the benefit to cover other TB cases that are sensitive to first line anti-TB drugs.
2. To align the PhilHealth TB DOTS Package with the current policies and guidelines for TB control
3. To strengthen the financial mechanism as leverage for better performance of providers leading to desired health outcomes and sustained TB control.

## **III. GENERAL GUIDELINES**

1. To avail of this package, accredited TB DOTS facilities shall comply with the prescribed guidelines of the NTP on diagnosis, treatment and reporting for TB.
2. PhilHealth TB DOTS Package shall cover TB cases that are susceptible to 1st line anti-TB drugs.
3. It shall cover for diagnostic exams, consultation services, drugs, health education and counseling during TB DOTS treatment.
4. PhilHealth TB DOTS Package shall cover both children and adults, with the following **registration groups** (whether bacteriologically confirmed or clinically diagnosed, pulmonary or extra-pulmonary):
  - a. New
  - b. Retreatment
    - 1) Relapse
    - 2) Treatment After Failure
    - 3) Treatment After Lost to Follow-up (Return After Default)
    - 4) Previous Treatment Outcome Unknown
5. The following cases are excluded: a. In-patient admissions b. Drug resistant TB c. Latent TB Infection
6. HIV patients that are under treatment for 1st line drug sensitive TB and on anti-retro viral drugs may avail of TB DOTS Package in accredited TB DOTS Centers and Out-patient HIV/AIDS Treatment (OHAT) Package in accredited HIV treatment hubs at the same time. Claims shall be filed separately.
7. The TB DOTS package shall be a fixed case rate of four thousand pesos (Php4,000.00) and to be given to health care institution in two separate payments.
  - a. The first payment of two thousand five hundred pesos (Php2,500.00) shall be given after the intensive phase (package Code 89221).

b. The second payment of one thousand five hundred pesos (Php1,500.00) shall be given after the continuation (maintenance) phase (package Code 89222).

8. Payment for referring physicians and other expenses for some services done outside the facility (e.g. chest x-ray) shall be settled by the facility.

#### **IV. PROVIDER ACCREDITATION**

1. Accreditation of TB-DOTS providers shall be in accordance with the policy on Provider Engagement through Accreditation and Contracting of Health Services as stated in PhilHealth Circular (PC) 54 s-2012 and subsequent issuances.

2. The Health Care Institution shall submit the following requirements upon its application for initial accreditation:

- a. Performance Commitment, duly signed by both the owner or local chief executive and the head of the facility (e.g. MHO, CHO, PHO, medical director, chief of hospital, etc.);
- b. Properly accomplished provider data record;
- c. Proof of payment of accreditation fee (Php1,000.00);
- d. Electronic copies of photos (in jpg format) of the internal and external areas of the facilities;
- e. Statement of intent for those applying in the last quarter of the current year as attached in PhilHealth Circular 11, s-2013;
- f. Updated DOH-PhilCAT Certificate;
- g. Location map;

3. As provided in Section VI.C of PhilHealth Circular 54, s-2012, accredited TB DOTS Package Providers may continuously participate in the National Health Insurance Program (NHIP) until such participation is withdrawn or terminated. To ensure this, TB DOTS Facilities shall submit annually (on or before January 31st) the following:

- a. Signed performance commitment;
- b. Updated DOH - PhilCAT TB DOTS Certificate (if not submitted, the facility shall be subjected to pre-accreditation survey);
- c. Latest Financial Statement/Report for private facilities;
- d. Proof of payment of accreditation fee (Php 1,000.00).

4. In line with All Case Rates Policy stated in PhilHealth Circular 31, s-2013 Section VI.B that professional services must be provided by accredited health care professionals, PhilHealth shall accredit TB DOTS physicians who provide consultation services in the TB DOTS facility.

- a. PhilHealth shall require that TB DOTS physician/s be accredited with PhilHealth for TB DOTS facilities applying for initial and re-accreditation in 2014.
- b. Currently accredited TB DOTS facilities shall have their physicians accredited by July 31, 2014.
- c. It shall be a requirement for all continuous, initial and re-accreditation in 2015.

5. Accreditation of TB DOTS physician/s shall be according to the provisions of PhilHealth Circular 10, s-2014. They shall submit to the nearest PhilHealth Local Health Insurance Office or Regional Office the following requirements for initial application: